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PTO/SB/21(08-00)

Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/485,559
Filing Date	February 11, 2000
First Named Inventor	S.W.Boehmer
Group Art Unit	1764
Examiner Name	V.Manoharan
Attorney Docket Number	FL1049-CPA

Total Number of Pages in This Submission

6

## ENCLOSURES (check all that apply)

☒ Fee Transmittal Form

☐ Fee Attached

☐ Amendment / Response

☐ After Final

☐ Affidavits/declaration(s)

☒ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/  
Incomplete Application

☐ Response to Missing  
Parts under 37 CFR  
1.52 or 1.53

☐ Assignment Papers  
(for an Application)

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a  
Provisional Application

☐ Power of Attorney, Revocation  
Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s)

☐ After Allowance Communication  
to Group

☐ Appeal Communication to Board of  
Appeals and Interferences

☐ Appeal Communication to Group  
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s) (please  
identify below):  
CPA (2)

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm  
or  
Individual name

James E. Shipley

Signature

MARK A. EDWARDS / *[Signature]* 39,542

Date

December 12, 2002

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: December 9, 2002

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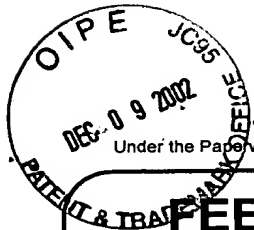
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*[Signature]* Attorney for

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PTO/SB/17 (10-02)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2003		Complete if Known	
Patent fees are subject to annual revision.		Application Number	09/485,559
		Filing Date	February 11, 2000
		First Named Inventor	S.W.Boehmer
		Examiner Name	V.Manoharan
		Group / Art Unit	1764
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	FL1049
TOTAL AMOUNT OF PAYMENT (\$)		920.00	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit Account:		Large Entity   Small Entity	
Deposit Account Number: 04-1928		Fee Code   Fee (\$)	
Deposit Account Name: E. I. du Pont de Nemours and Company		Fee Description	
The Commissioner is authorized to: (check all that apply)		Fee Paid	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments			
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity   Small Entity			
Fee Code   Fee (\$)			
1001 740   2001 370		Utility filing fee	
1002 330   2002 165		Design filing fee	
1003 510   2003 255		Plant filing fee	
1004 740   2004 370		Reissue filing fee	
1005 160   2005 80		Provisional filing fee	
SUBTOTAL (1)		(\$ 0.00)	
2. EXTRA CLAIM FEES			
Total Claims -20 ** = 0		Extra Claims X Fee from below = Fee Paid	
Independent Claims -3 ** = 0		X 18 = 0	
Multiple Dependent <input type="checkbox"/>		X 84 = 0	
Large Entity   Small Entity			
Fee Code   Fee (\$)			
1202 18   2202 9		Claims in excess of 20	
1201 84   2201 42		Independent claims in excess of 3	
1203 280   2203 140		Multiple dependent claim, if not paid	
1204 84   2204 42		** Reissue independent claims over original patent	
1205 18   2205 9		** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$ 0.00)	
**or number previously paid, if greater; For Reissues, see above			
		Other fee (specify)	
		*Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) (\$ 920.00)	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	James E. Shipley	Registration No. (Attorney/Agent)	32,003
Signature	<i>James E. Shipley</i>	Telephone	302-892-8160
		Date	December 9, 2002

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